



**Testimony of Robert Smith, Ph.D., N.C.C., F.P.P.R., President of the American Counseling Association to
the House Committee on Veterans' Affairs Subcommittee on Health**

May 15th, 2015

Chairman Benishek, Ranking Member Brownley and Members of the subcommittee, I want to thank you for inviting me to submit testimony to the Committee today. It is an honor and a privilege to speak on behalf of the American Counseling Association and we appreciate the opportunity to contribute to this very important discussion. We share the concerns of this committee regarding the well-being of our veterans. We consider it a national tragedy that on average, one of our veterans commits suicide every 80 minutes. I can think of no more pressing concern for this committee than stopping this terrible toll.

The American Counseling Association is the country's largest and oldest professional association representing the counseling profession, with over 55,000 members across the United States and overseas. Our members have diverse backgrounds and many of them specialize in treating substance abuse disorders, mental health issues, trauma, family issues and depression among others.

There are more than 120,000 licensed professional counselors (LPC's) nationwide, authorized under licensure laws enacted in all 50 states and other U.S. jurisdictions to practice independently. As with the profession of social work, states use slightly differing titles for those licensed as professional mental health counselors, the most commonly used title being "licensed professional counselor." LPCs meet education, training, and examination requirements similar to—and in many states, more stringent than—those of marriage and family therapists and clinical social workers. Licensed professional counselors must have a master's degree in counseling or a related field, pass a national exam (in some cases two exams), and accumulate thousands of hours of post-degree supervised experience. As with other health care professionals, counselors must adhere to a code of ethics, are required to practice within the scope of their expertise, and practice subject to the oversight and approval of their state's licensure board. Counselors provide outpatient psychotherapy independently under private sector health plans nationwide, as authorized by state licensure laws, and form a significant part of the nation's mental health workforce.

I would like to state for the record, that while I am immensely grateful for the opportunity to offer testimony to your committee, I am also very saddened and very frustrated. These emotions stem from the fact that while I was preparing this testimony to you, I reviewed previous testimony that one of my predecessors, Dr. Brad Erford, submitted to some of you just over two years ago. Upon reviewing that testimony, I saw that many of the problems that were occurring then are still occurring now. Most, if not all the barriers that Licensed Professional Counselors face when seeking employment in the VA still exist today. In short, after working with VA for over two years and after legislation was passed over seven years ago, we are no closer to having more mental health clinicians available to our veterans than we were two years ago. With the rate of veterans' suicide and the scandals that have ensued during those years, it is remarkable and quite frankly, an insult to our veterans that nothing has been done.



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As of last month, the Office of Personnel Management (OPM) has still not issued an occupational series for Licensed Professional Counselors in the VA. This means that if an LPC was to be hired, their ability to provide the treatment that veterans so desperately need would be in question. We and other organizations have asked the VA and OPM to resolve this issue for over three years, only to be told by the VA that OPM must authorize the series and then have OPM tell us that VA must make it a priority for OPM to authorize the series. Either way, we are still no closer to having this problem solved.

Another source of frustration has been that we have been asking the VA to fully incorporate licensed professional counselors into the training program that is run by the Office of Academic Affiliations. The VA's Office of Academic Affiliations each year establishes paid traineeship positions for both psychologists and clinical social workers, which serve as a pathway to service in the VA health care system. After being denied entry to the program for several years, the VA has finally decided that they will at least begin a pilot program for counselors to serve as trainees. However, it is our understanding that the pilot program will require that the VA utilize LPCs as trainers, but only if those LPCs are serving in a supervisory position. With LPCs currently making up less than one percent of the entire VA, we are anxious to see if there are even any LPCs eligible to institute this pilot program. Couple this criterion with the fact that the VA has recently announced that Vet Centers will no longer be eligible to be training facilities, and the possibility of this pilot program succeeding dwindles dramatically.

Sadly, our overall experience with the VA has been that the only time that they have been creative or innovative when it comes to delivering mental health care is when they find ways to prohibit the delivery of that care.

As the Chairman and the rest of the committee know, Licensed Professional Counselors can make a valuable contribution to treating the mental health concerns of veterans, and the consequences of psychological and cognitive injuries are the signature wounds of the Iraq and Afghanistan conflicts. Policymakers both inside and outside the Department of Veterans Affairs have repeatedly said that there aren't enough mental health providers available to meet veterans' treatment needs. From our perspective this problem is to a large extent a self-inflicted wound, because despite a past press release to the contrary, the VA has effectively decided not to utilize LPCs as part of its mental health workforce. The VA's rules and policies have kept far too many counselors from operating under either of those two areas at a time when we need them most.

And these rules could be changed by the Administration in a fairly simple and quick manner so that we can begin to deliver the care and treatment that our veterans need right now.

In an effort to reform the delivery of care and begin truly honoring our veterans, the American Counseling Association would ask the committee that they immediately direct the VA to take the following actions:

1. Fully integrate Licensed Professional Counselors (LPC) into VISNs across the country
2. Demand accountability and action at the VA and OPM on finalizing an occupational series for LPCs
3. Reform VA Supervisory Guidelines to accelerate hiring of LPCs
 - a. This should be done across the VA and immediately for the LPC training pilot program
 - b. There is precedent for this with other professionals and their hiring rates increased dramatically
4. Cross-post mental health care provider job openings to include licensed professional counselors



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The members of this committee know what the problems are in regards to overcoming the barriers to more efficient and effective VA staffing. In many cases, the committee has been the leader in calling on the VA to implement solutions to ensure that the VA overcomes those barriers. But it seems that the biggest barrier that stands between the veteran and mental health care is the VA itself. What is needed here is a wholesale change in the culture and approach that the VA takes in developing new ways to treat our veterans. But how we get to that result is the question we must answer and answer urgently.

After the scandals of the past year, the loss of our veterans to suicide, and the lack of access to adequate care, it seems like the VA is still an immovable roadblock. I and my organization are at a loss as to what will ever make them realize that their inaction has in all too many cases been the very thing that has kept veterans from getting the help they deserve.

On a plaque on the VA's headquarters is the VA's motto, a line taken from the second inaugural address of President Abraham Lincoln, which states, "To care for him who shall have borne the battle and for his widow and his orphan". It is of course more than a motto, it is a sacred promise that we make with our nation's veterans. Unfortunately, when it comes to fulfilling that obligation, at least when it comes to mental health, we are all failing. We all fail because we let the problems like the ones I have described perpetuate and we do not hold the VA accountable.

I hope that today, we can begin to fulfill that promise and ensure that we are caring for those who shall have borne the battle and their families. The American Counseling Association is ready, all that we ask is that the Congress and the VA allow us to treat the invisible wounds of war and welcome our veteran's home.